Name in Full Lemuel Ayers

Certificate of Death

Died ~~at~~ near Town Rock Hall County Kent MARYLAND

Date 189 8 Month 11 Day 2 Age Y. 83 M. D. Native of Occupation

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 8

Husband of Wife

Father's Name

Mother's Name 142a

Cause of Death Primary Suicide by drinking

~~Immediate~~ laudanum

How long sick

~~Accident~~, Suicide, ~~Homicide~~

Reported by Centreville Record 11-5

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

REPLIED

+ Jay Blackiston Underwood
Rock Hall Del.

Dec. 15

John E. Beck, J.P. Rock Hall

Dr. W. O. Selby Rock Hall.

Name in Full — Certificate of Death

Annie M. Chambers

Died at — Town: Dorsman — County: Kent — MARYLAND

Date 189 — Month: Nov — Day: 22 — Age: Y. 64 M. D. — Native of: Delaware — Occupation: Nurse

Male ~~Female~~ — White ~~Colored~~ — Married ~~Single~~ — Widow Widower — ~~Divorced~~ — Number of children living 3

~~Husband~~ Wife of Wm. C. Chambers

Father's Name: Isaac Roberds — Mother's Name: Susan Roberds

Cause of Death — Primary: Pericarditis — How long sick: 2 Weeks

Immediate: Cardiac Palsy.

Accident, Suicide, Homicide

Reported by: Jas. H. White

Address: Still Pond Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65966

Name in Full John Suling Duling

Certificate of Death

Town Millington County Kent

Died at MARYLAND

Month Day Y. M. D. Native of Occupation

Date 189 8 11-2 Age 34 Maryland Carpenter

Male White Married Widow ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 3

Husband ~~Wife of~~

Father's Name [illegible] Mother's Name John Suling

Cause of Death: Primary Consumption How long sick

Immediate

Accident, Suicide, Homicide

Reported by Dr W H Jacobs

Address Millington Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full — Certificate of Death

Henry Davis

Died at Town: Still Pond County: Kent — MARYLAND

Date 189 8 Month: Nov. Day: 3 | Age Y. 96 M. 10 D. 14 | Native of | Occupation Del.

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 1

Husband ~~Wife~~ of Catharine Davis

Father's Name Zachariah Davis | Mother's Name — Davis

Cause of Death: Primary Cirletis | How long sick 1 Week

Immediate Uraemia | ~~Accident, Suicide, Homicide~~

Reported by Jas. H. Urie, M.D.

Address Still Pond Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Certificate of Death

Howard Thomas Ford

Died at Town: Kennedyville County: Kent County MARYLAND

Date 1898 Month: Nov Day: 3 Y. M. D. Age: 18 Native of Occupation

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 5

~~Husband~~ ~~Wife~~ of

Father's Name Isaac J. Ford

Mother's Name Isabel. Stanley

Cause of Death: Primary Typhoid Fever How long sick 2 weeks

Immediate Internal Hemorrhage Accident, Suicide, Homicide

Reported by G. D. Barwick M.D.

Address Kennedyville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Henrietta

Mrs. H. W. Hurlock.

Certificate of Death

Died near Town Kennedyville. County Kent- MARYLAND

Date 1898 Month 11 Day 17 | Age Y. 79 M. D. | Native of Del. | Occupation Home Wife.

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ Widow ~~Widower~~ | ~~Divorced~~ | Number of children living 5

Husband / Wife of John S. Hurlock.

Father's Name Dont-Know. Mother's Name Dont-Know.

Cause of Death — Primary: 44 — How long sick

Immediate: Paralysis. — Accident, Suicide, Homicide

Reported by W. S. Maxwell.

Address Still Pond, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full: Emile L. Johnson

Certificate of Death

Died at Town: Bucks Station County: Kent Co MARYLAND

Date 189 8 Month 11 Day 16 | Age Y. 32 M. D. | Native of Del | Occupation Housewife

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~of~~

~~Wife~~

Father's Name: John Segretz

Mother's Name: x57

Cause of Death: Primary: Aortic Regurg. & Mitral Stenosis — How long sick: 3 yrs.

Immediate: Oedema of Lungs & Ex Nervation

~~Homicide~~

Reported by: Dr. W. F. Pyfer

Address: Louisville Kent Co Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Elwood Robinson

Certificate of Death

Died at Town Lankford County Kent Co., MARYLAND

Date 1898 Month November Day Age Y. 8 M. yrs. D. Native of Md Occupation School-boy.

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ ~~Number of children living~~

~~Husband~~ of Wife

Father's Name Wright Robinson

Mother's Name

Cause of Death: Primary Typhoid Fever (Pneumonic) How long sick 28 days.

Immediate Heart Failure

Accident, Suicide, Homicide

Reported by H. L. Dodd,

Address Chestertown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full Certificate of Death

Lizzie Smith.

Died at Town Abbott Hovan County Kent. MARYLAND

Date 1898 Month Nov. Day 7 Age Y. 68 M. D. Native of Occupation

~~Male~~ ~~Female~~ ~~White~~ Colored ~~Married~~ ~~Single~~ Widow Widower Divorced Number of children living Cant say

Husband Wife of Cant say.

Father's Name Cant say Mother's Name Cant say

Cause of Death Primary Bright dis 97 How long sick 6 yrs

Immediate Heart dis Accident, Suicide, Homicide

Reported by Chas. W. Ethaland MD

Address Chestertown Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full Mary Ann Tiller

Certificate of Death

Died at Town Millington County Kent MARYLAND

Date 189 8 Nov. Month Day 16 Age Y. M. D. 4 years Native of Md Occupation None

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single Widower Num~~ber of children living~~

Husband of Wife

Father's Name John Tiller

Mother's Name Mary Johnson

Cause of Death { ~~Primary~~ 1469 How long sick 24 hrs

Immediate Burned to death Accident, Su~~icide, Homicide~~

Reported by J. C. Hackett

Address Millington

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

Name in Full | Certificate of Deeth

A. S. Tillison.

Died at Town Heptron Sta. County Kent- MARYLAND

Date 1898. Month 11 Day 16 | Age Y. 13 - M. D. | Native of Kent- | Occupation

~~Male~~ ~~Wife~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Sam Tillison | Mother's Name Aggie Tillison.

Cause of Death: Primary 22a | How long sick 6 mo-

Immediate 1 Tuberculoses. | Accident, Suicide, Homicide

Reported by W. S. Maxwell.

Address Still Pond Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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